



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Günther Spatz, et al.

Serial No.: 10/070,715

Filed: August 7, 2002

For: DEVICE AND METHOD FOR  
FILLING CONTAINERS

Examiner: Christopher R. Harmon

Group Art Unit: 3721

Attorney Docket No.: 2169.GLE.PT

PATENT

12/73  
K. Coffey  
10/6/03

CERTIFICATE OF MAILING

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AMENDMENT

MAIL STOP NON-FEE AMENDMENT  
Commissioner For Patents  
P. O. Box 1450  
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Sir:

Responsive to the Office Action mailed July 8, 2003, the Applicants amend the application as follows:

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

3721

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/070,715
		Filing Date	August 7, 2002
		First Named Inventor	Günther Spatz
		Group Art Unit	3721
		Examiner Name	Christopher R. Harmon
Total Number of Pages in This Submission (including this sheet)	8	Attorney Docket No.	2169.GLE.PT

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Check in the amount of \$____ <input type="checkbox"/> Credit card authorization in the amount of \$____ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings ____ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:	<b>RECEIVED</b> <b>OCT 02 2003</b> TECHNOLOGY CENTER R3700
Remarks			
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Attorney for Applicant	Julie K. Morriss, Registration No. 33,263 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile		
Signature	<i>Julie K. Morriss</i>	Date	9-24-03
CERTIFICATE OF MAILING UNDER 37 CFR § 1.8			
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Typed or Printed Name		Julie K. Morriss	
Signature	<i>Julie K. Morriss</i>	Date	9-24-03

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